State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures MAR 2 3 2005

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Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070

See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Candidate or Committee SD Chicograetic Political Action Committee (SDCF
Complete Mailing Address 323 ZZnd Ave Brookings 51 57006
Name of Person Making Report Chad Munsterman Daytime Phone Number 605-692-7222
If you are a candidate, what office are you seeking?
If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.
Type of Report (See pages 4 & 5 of Guideline Book) Amendment of Year End Report and the Pre-general Company's report For Reporting Period Ending (See pages 4 & 5 of Guideline Book) 12/3/04 + 10/23/04
The following verification must be completed before submitting report.
VERIFICATION OF PERSON MAKING REPORT I had has lerman b. C. (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.
Date: 3 14 05 Candidate Signature or Signature of Committee Treasurer or Chairperson
Revised July 2001 Filed this 33rd day of

Name of Candidate or Committee SDCPAC					
For the reporting period end	ding 12/31/04				
combine all contributions of \$100 o contributions on their respective line year from an individual or political amount, name, address and place of	Schedule A – Direct Call direct contributions. You must keep r less from individuals and the same fires below and on the next page. Any coparty and all contributions from PAC employment (if applicable) of the contuplicated if you need more space, or you	a record of all contributors, but for to com political parties and enter these so intribution of more than \$100 or aggress must be entered as a separate item (attributor. Each type of contributor has	ums as un egate dur itemized s their ow	nitemized ring a calendar) giving the	
Unitemized Contributions from In	Unitemized Contributions from Individuals:				
Itemized Contributions from Indi Name	viduals Residence Address	Place of Employment (Name of Employer)			
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Total of Itemized Contributions for	rom Individuals:		- *\$ <u> </u>	0	

Name of Candidate or Committee 5DCPA	1.6		Appendix B
For the reporting period ending 12/3/04			
	Contributions (continued)		
Unitemized Contributions from Political Parties:		*\$	0
Itemized Contributions from Political Parties			
Party Name	Address		
		\$	
			
Total of Itemized Contributions from Political Parties:		*\$	0
Itemized Contributions from Political Action Committees (P PAC Name	·		
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Total of Itemized Contributions from Political Action Comm	nittees:	*s -	

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Total of All Direct Contributions (Sum of all lines with an *)

\$ 100-

SDCYAC	
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money for the candidate and the net proceeds	derived from each event. If a
	Net Proceeds
	-
Name, Residence Address & Place of Employment	Estimated Value
	77.4-77.4.48 Selection (19.00 Selection
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ž.	Amount
	ALTONOMIC OFFICE OF THE STATE O
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	Fund-Raising Events Proceeds money for the candidate and the net proceeds of results in their aggregate being more than \$10 central ce

Name of Candidate or Committee:	SDCPAC	
For the reporting period ending:	12/31/04	

Expenses		Contributions Made to Candidates and Com	4
Item	Amount O	Name of Candidate or Committee	Amount
Advertising	0		
Consulting	0		
Postage	0		
Printing		1	
Rent	0	1	
Salaries	0	1	
Telephone	0		
Travel			
Utilities	0		
List other expense	List other expense		
items below	amounts below		
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Name of Candidate or Committee: 5D CPAC				
For the reporting period ending:				
	Schedule F - Debts and Oblig	gations		
This schedule is to report all of the has been contracted but not billed	the candidate's campaign obligations which are unpaid, estimate the amount of the obligation.	aid at the end of the reporting period. If a service		
Owed to:	Purpose:	Amount		
÷				
Total Obligations:		0		

Na	me of Candidate or Committee:	<u> 500</u>	PAC			
For	the reporting period ending:	2/3/1	64			
	summary sheet will give a brief outline of all cam the schedules previously completed.		nmary Pag		g period. Pleas	se transfer all totals
1.	Amount on hand, if any, at the beginning	of the	reporting pe	eriod:	\$	8379.09
2.	Receipts					
	Schedule A - Direct Contributions	\$	100,00			
	Schedule B - Fund-Raising Events	\$	0			
	Schedule C - In Kind Contributions	\$	ð			
	Schedule D - Other Income	\$	0			
	Total of all Receipts	\$	100			
3.	Total Monetary Receipts (A+B+D)				\$	100 —
4.	Candidate's Personal Contribution to Own	n Carr	npaign		\$	δ
5.	5. Monetary Loans to Candidate or Committee During Reporting Period \$		0			
6.	Monetary Loans Repaid During Reportin	g Peri	od		\$	· O
7.	Expenditures - Schedule E				\$	<u> </u>
8.	Unpaid Obligations - Schedule F	\$			*	
9.	Amount on hand at the close of this report. This should equal lines $(1+3+4+5) - (6+7)$		eriod. *		\$	8479.09

Appendix C

Secretary of State

State Capitol, Ste 204 500 East Capitol Avenue Pierre, South Dakota 57501-5070 sdsos@state.sd.us



Chris Nelson Secretary of State

Chad Heinrich Deputy

State of South Dakota

Voluntary Statement of Organization for a Political Action or Ballot Question Committee

State law does not require new political action (PAC) or ballot question committees to register with the Secretary of State. Law does however require these committees to file campaign finance reports periodically following the commencement of political activity. This voluntary registration form will give the Secretary of State the information necessary to send your committee the proper reporting forms prior to the deadline for filing.

FULL NAME OF COMMITTEE:	
MAILING ADDRESS:	
COMMITTEE TREASURER:	
PHONE:	ω
TYPE OF COMMITTEE (PAC or Ballot Qu If you are a ballot question committee, plea supporting or opposing.	estion): ase also indicate the measure which you are
Date:Signatur	e of person submitting voluntary registration

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www.state.sd.us/sos

Corporations (605) 773-4845 Fax (605) 773-4550